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| REQUEST FOR ORAL HEARING | | | Docket Number (Optional) | | |
|--|---|---------------------------------------|--------------------------------------|-----------------------|--|
| | | | | | |
| BEFORE | | | 019287-0317293 | | |
| THE BOARD OF PATENT APPEALS AND INTERF | | FERENCES | 019207-0317293 | | |
| I hereby certify that this correspondence is being facsimile In re Application of | | | | | |
| transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 [37 CFR 1.8(e)] on February 26, 2008 | | LUNDY M. LEWIS | | | |
| | | Application Number | | Filed | |
| | | 09/578 | 3,156 | May 23, 2000 | |
| - | | For IN SERVICE LEVEL MANAGEMENT (SLM) | | | |
| Signature | | Art Unit | | | |
| Typed or printed | | 2145 | - | Jeffrey R. Swearingen | |
| name | | 2173 | | Jeffiey R. Bwearingen | |
| Applicant hereby requests an oral hearing before the Board of Patent Appeals and Interferences in the appeal of the above-identified application. | | | | | |
| The fee for this Request for Oral Hearing is (37 CFR 41.20(b)(3)) $ \$ $ | | | | \$1,030.00 | |
| | Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: | | | | |
| | A check in the amount of the fee is enclosed. | | | | |
| | Payment by credit card. Form PTO-2038 is attached. | | | | |
| | The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet. | | | | |
| X | The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No | | | | |
| | A petition for an extension of time under 37 CFR 1.136(b) (PTO/SB/23) is enclosed. For extensions of time in reexamination proceedings, see 37 CFR 1.550. | | | | |
| WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. | | | | | |
| I am the | | | | | |
| | applicant/inventor. | | 2h | - | |
| | assignee of record of the entire interest. | | | Signature | |
| | See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclose | :d | Syed Jafar Ali Typed or printed name | | |
| | (Form PTO/SB/96) | | Typed or printed name | | |
| x | attorney or agent of record. Registration number | | | | |
| ш | Registration number | | February 26, 2008 Date | | |
| | | | | | |
| | attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. | | 703.770.7540 | | |
| | - | Telephone number | | | |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. | | | | | |

This obsection of information is recurred by 3 T-SER 41.20(3)(3) The information is required to obtain or reads a bornell by the spublic which is to file (and by the LUSPTO depressed) an application. Confiderability is possined by 8 LUS C-21 and 3 T-CRF 1.1, 1.4 and 4.1 6.1. This clientage is estimated to last 2 invitates to complete, including gathering, preparing, and submitting the completed application form to the LUSPTO. Time will very descending sport the included application form to the LUSPTO. Time will very descending sport the included application form of the comments on the amount of time by our coulde to complete this form and/or surgessistors for reading this burden, should be sent to the information Officer, U.S. Petent and Trademark Office, U.S. Department of Commence, P.O. Box 1450, Alexandria, V.A. 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO. Commissioner for Patents, P.O. Box 1450, Alexandria, V.A. 22313-1450.

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forms are submitted.